



MFP Financial Reporting

How do we get the money and Report Expenditures?



What do I have Primary Responsibility For?



MFP Financial Reporting Form



- Submitted by the State MFP Proj. Dir. to the CMS Proj. Off.
- Captures information similar to the CMS 64 Information Forms.
- Breaks out the HCBS Services line into individual services to provide your PO with more detailed information about demonstration expenditures.





- Maintenance of Effort Statutory Requirement
- Covers State expenditures for the entirety of your Medicaid LTC system
- Tabs 1 and 2 should capture the LTC services and expenditures paid for by the regular Medicaid Program
- Tab 3 should capture the MFP expenditures and Rebalancing Investments



- May have been included in your RAI or Terms and Conditions
- Is required as part of your OP
- Will be required as part of your annual supplemental award application
- Captures very high level budget information and serves as your Budget Request/Proposal





- Required form for any grant issued by CMS
- Submitted by the State MFP Proj. Dir. to the CMS Grants Office (cc to the CMS Proj. Off.)
- Semi-annual report of all expenditures and unliquidated obligations



How do we get the Money?



MFP Expenditures



 Includes All 3 buckets of services and administrative costs

Payment Management System (PMS)

Submitted electronically by your agency's

designated PMS Administrator



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- PMS Smartlink Used to draw down grant funds at any time.
 - The SMARTLINK funds request process
 enables grantees to request funds using a
 Personal Computer with an Internet connection.
 The funds are then delivered to the recipient via
 Electronic Funds Transfer (EFT).
 - Information You Need From PMS In order to place a request for funding, you need to obtain your User Identification and Password pair which allow you access to our systems. This information will come from your DPM Account Liaison.

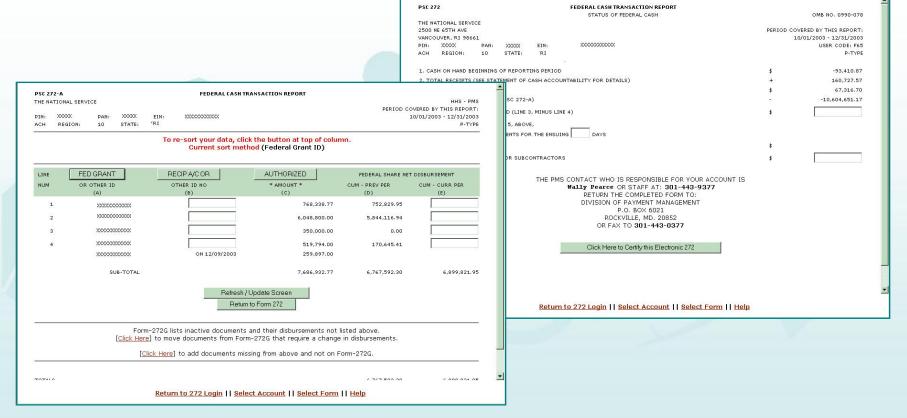
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MFP Expenditures



 PSC 272 – Quarterly report of expenditures against those draw downs.







Non Long-Term Care, i.e. acute services

- Billed through the regular Medicaid program on the CMS 64 (MBES System)
- Submitted electronically by your agency's designated MBES Administrator for federal reimbursement



What are the other Financial Reporting Requirements?



Informational 64 Forms



- MFP Expenditures All 3 Buckets of services and administrative costs
- Submitted electronically by your agency's designated MBES Administrator (64 91, 9PI, 10I, and 10PI)
- Not used for reimbursement CMS needs aggregate expenditure information to be entered into the MBES system for Medicaid budgeting purposes



MFP Finder & Claims Files



- For Technical Support, contact
 Mathematica Policy Research (MPR)
- Created and submitted by your agency's MSIS Administrator
- Finder File Flags the individual demonstration participants in MSIS
- Claims File Extracts the expenditures for those individuals





Questions?

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